

Vermont Nursing Home Diversion Proposal Abstract

August 2007

The Vermont Department of Disabilities, Aging and Independent Living (DAIL) requests an eighteen month \$500,000 grant to develop a comprehensive nursing home diversion program targeting individuals age 60 and over who currently are clinically-eligible for the Medicaid-funded Choices for Care program but do not yet meet the Medicaid long-term care financial eligibility criteria. Caregivers of the target population will also be served. The goals of this initiative, built upon the new provisions within the Older Americans Act, support DAIL's mission and vision to build a system of supports and services that enable Vermonters to live independently in the community and avoid unnecessary nursing home placement.

Specifically, DAIL will partner with local Area Agencies on Aging (AAAs) to expand the existing Choices for Care Flexible Choices option to non-Medicaid financially-eligible individuals age 60 and over. The Area Agencies on Aging will serve as the single point of entry, collaborating in partnership with the Aging & Disability Resource Connection initiative currently under development and the Department for Children and Families, Economic Services Division. The existing Flexible Choices option, a Cash and Counseling model, under the Choices for Care program brings the expertise and infrastructure, including support brokerage services necessary to build a successful program. The new program will develop a means-tested methodology to target flexible services to those individuals most at-risk of spending down to Medicaid. Designated AAA case managers will function as "options counselors" to work with individuals to assess their needs, identify necessary services, develop consumer-directed service plans, and provide ongoing assistance and monitoring as requested and necessary.

DAIL will contract with technical assistance experts to assist in the development of two important educational areas: 1) develop and implement a comprehensive options counseling curriculum for all AAA case managers as well as the current Choices for Care Long Term Care Clinical based upon the approaches developed by the National Association of State Units on Aging and Independent Living Research Utilization to facilitate the development of an interactive and informed decision making process; and (2) development of educational programs around the concept of "self-direction", supporting options counselors to translate concepts into

practice to truly foster consumer choice and direction within our AAAs case management practices and service delivery.

Existing Older Americans Act Title III-B and III-E money and State general funds will be used as match to create a comprehensive package of flexible services from which eligible individuals can choose. Individual budgets will be developed using the State's Independent Living Assessment, and ongoing monitoring and quality improvement activities will be designed modeling off of the existing Flexible Choices program experience.